INSTRUCTIONS FOR OGE FORM 450, CONFIDENTIAL FINANCIAL DISCLOSURE REPORT

A. Why You Must File

This report is a safeguard for you as well as the Government. It provides a mechanism for determining actual or potential conflicts between your public responsibilities and your private interests and activities. This allows you and your agency to fashion appropriate protections against such conflicts.

B. Who Must File

Agencies are required to designate positions at or below GS-15, O-6, or comparable pay rates, in which the nature of duties may involve a potential conflict of interest. Examples include contracting, procurement, administering grants and licenses, regulating/auditing non-Federal entities, other activities having a substantial economic effect on non-Federal entities, or law enforcement.

All special Government employees (SGEs) must file, unless exempted by their agency or subject to the public reporting system. Agencies may also require certain employees in positions above GS-15, O-6, or a comparable pay rate to file.

C. When to File

New entrant reports: Due within 30 days of assuming a position designated for filing, unless your agency requests the report earlier. No report is required if you left another filing position within 30 days prior to assuming the new position. (SGEs must file new reports upon <u>each</u> reappointment or redesignation, at the time specified by the agency.)

Annual reports: Due not later than October 31, unless extended by your agency.

D. Reporting Periods

New entrant reports: The reporting period is the preceding twelve months from the date of filing.

Annual reports: The reporting period covers October 1 through September 30 (or that portion not covered by a new entrant report). However, no report is required if you performed the duties of your position for less than 61 days during that twelve-month period. (All reappointed or redesignated SGE's file reports, regardless of the number of days worked).

E. Where to File

With ethics officials at the agency in which you serve or will serve, or in accordance with their procedures.

F. Definitions

<u>Dependent Child</u> - means your son, daughter, stepson, or stepdaughter if such person is either:

- (1) unmarried, under age 21, and living in your household; or
- (2) a "dependent" of yours for Federal income tax purposes. See 26 U.S.C. 152.

<u>Honoraria</u> - means payments (direct or indirect) of money or anything of value to you or your spouse for an appearance, speech or article, excluding necessary travel expenses. Also included are payments to charities in lieu of honoraria.

Special Government Employee (SGE) - is defined in 18 U.S.C. 202(a) as: an officer or employee of an agency who performs temporary duties, with or without compensation, for not more than 130 days in a period of 365 days, either on a full-time or intermittent basis.

G. General Instructions

1. Filers must provide sufficient information about outside interests and activities so that ethics officials can

make an informed judgment as to compliance with applicable conflict of interest laws and standards of conduct regulations.

- 2. This form consists of five parts, which require identification of certain specific financial interests and activities. NO DISCLOSURE OF AMOUNTS OR VALUES IS REQUIRED. You must complete each part (except as indicated for Part V) and sign the report. If you have no information to report in any part or do not meet the threshold values for reporting, check the "None" box. New entrants and SGEs are not required to complete Part V.
- 3. You must include information applicable to yourself, your spouse, and dependent children on Parts I, II, and V. This is required because their financial interests are attributed to you under ethics rules in determining conflicts of interest. Information about your spouse is not required in the case of divorce, permanent separation, or temporary separation with the intention of terminating the marriage or permanently separating. Parts III and IV require disclosures about yourself only.
- 4. You may distinguish any entry for a family member by preceding it with <u>S for spouse</u>, <u>DC for dependent child</u>, or J for jointly held.

Part I: Assets & Income

Assets:

1. Report all assets held for investment or for the production of income by **you**, **your spouse**, **and dependent children**, with a value greater than \$1,000 at the end of the reporting period or which produced more than \$200 in income during the reporting period.

Salary and Earned Income:

- 1. **For yourself**: report all sources of salary and earned income greater than \$200 during the reporting period.
- 2. **For your spouse**: report all sources of salary and earned income if greater than \$1,000 (for honoraria, if greater than \$200).

3. For dependent children: no earned income needs to be reported.

Examples of Assets:

- Stocks
- Tax Shelters
- Mutual Funds
- Annuities
- Trust Holdings
- Trades & Businesses
- Investment Life Insurance
- Bonds
- Investment Real Estate
- Pensions
- IRA/401(k) Holdings
- Commodity Futures
- Partnership Interests
- · Collectibles held for Investment

Examples of Income:

Investment Income

- Dividends
- · Rents and Royalties
- Interest
- Capital Gains

Earned/Other Income

- Fees
- Salaries
- Commissions
- · Retirement Benefits
- Honoraria

Notes:

- 1. For pensions, you will ordinarily just need to indicate the name of the sponsoring employer. However, if you have control over the specific investment assets held in your pension account (it is not independently managed), you must also list those underlying investments or attach an account statement that lists them.
- 2. For publicly available **mutual funds**, you are only required to indicate the name of the fund, not the investments that the mutual fund holds in its portfolio. You must, however, always indicate the full name of the specific mutual fund in which you hold shares, not just the general family fund name.
- 3. For other publicly available investment funds, such as publicly offered units of limited partnerships, the disclosure requirements are the same as for mutual funds - list the full name of the limited partnership, but not its underlying portfolio investments.
- 4. For a privately held trade or business, report its name, location, and description of activity.

Do Not Report:

- 1. Your personal residence, unless you rent it out;
- 2. Federal Government salary or retirement benefits such as the Thrift Savings Plan;
- 3. Social Security benefits:
- 4. Money owed to you, your spouse, or dependent child by a spouse, parent, sibling or child;
- 5. Accounts including certificates of deposit, savings accounts, interest-bearing checking accounts, or any other forms of deposit in a bank, savings and loan association, credit union or similar financial institution;
- Money market mutual funds and money market accounts:
- 7. U.S. Government obligations (including Treasury bonds, bills, notes and saving bonds);
- 8. Government securities issued by U.S. Government agencies or Government-sponsored corporations, such as TVA. GNMA. FNMA: and
- 9. The underlying holdings of a trust that: 1) was not created by you, your spouse, or dependent children, and 2) the holdings or sources of income of which you, your spouse and dependent children have no past or present knowledge. An example is a trust created by a relative, from which you receive periodic income but have no knowledge about its assets. Just identify the trust by name and date of creation.

Part II: Liabilities

Report for Yourself, Spouse and Dependent Children:

1. Liabilities over \$10,000 owed to any creditor at any time during the reporting period.

Do Not Report:

- 1. Mortgages on your personal residence unless you rent it out;
- 2. Personal liabilities owed to a spouse, or the parent, sibling, or child of you, your spouse, or dependent child:
- 3. Loans for personal automobiles, household furnishings, or appliances, where the loan does not exceed the purchase price; and
- 4. Revolving charge accounts where the outstanding liability does not exceed \$10,000 at the end of the reporting period.

Part III: Outside Positions

Report for Yourself:

1. All positions outside the U.S. Government held at any time during the reporting period (including positions no longer held), whether or not paid.

Positions include an officer, director, trustee, general partner, proprietor, representative, executor, employee, or consultant of any of the following:

- 1. A corporation, company, firm, partnership, trust, or other business enterprise;
- 2. A non-profit organization;
- 3. A labor organization; and
- 4. An educational or other institution outside the Federal Government.

Do Not Report:

- 1. Positions held in any religious, social, fraternal, or political entity;
- 2. Positions solely of an honorary nature; and
- 3. Positions held by a spouse or dependent child.

Part IV: Agreements and Arrangements

Report Your Agreements or Arrangements for:

- 1. Current or future employment;
- A leave of absence from private or other non-Federal employment;
- Continuation of payment by a former employer other than the Federal Government (including severance payments); and
- Continuing participation in an employee pension or benefit plan maintained by a former employer other than the Federal Government.

Do Not Report:

 A spouse or dependent child's agreements or arrangements.

Part V: Gifts and Travel Reimbursements

Note: Part V is not applicable to new entrants and SGE's.

Report for You, Your Spouse, and Dependent Children:

- Travel-related cash reimbursements received from one source during the reporting period totaling \$250 or more.
- Any other gifts totaling \$250 or more from any one source. A "gift" is defined as anything of value, unless you give something of equal or greater value to the donor. This includes tangible items and in-kind transportation, food, lodging, and entertainment.

Note: Gifts or reimbursements valued at \$100 or less need not be included in determining the \$250 reporting threshold.

Do Not Report:

- 1. Anything received from relatives, the U.S. Government, D.C., State, or local governments;
- 2. Bequests and other forms of inheritance;
- 3. Gifts and travel reimbursements given to your agency in connection with your official travel;
- 4. Gifts of hospitality (food, lodging, entertainment) at the donor's residence or personal premises; and
- 5. Gifts or reimbursements received by a spouse or dependent child totally independent of the relationship to the filer (Example: a spouse's reimbursement in connection with private employment).

Privacy Act Statement

Title I of the Ethics in Government Act of 1978 (5 U.S.C. App.), Executive Order 12674, and 5 CFR Part 2634, Subpart I, of the Office of Government Ethics regulations require the reporting of this information. The primary use of the information on this form is for review by Government officials of your agency, to determine compliance with applicable Federal conflict of interest laws and regulations. Additional disclosures of the information on this report may be made: (1) to a Federal, State, or local law enforcement agency if the disclosing agency becomes aware of a violation or potential violation of law or regulation; (2) to a court or party in a court or Federal administrative proceeding if the Government is a party or in order to comply with a judge-issued subpoena; (3) to a source when necessary to obtain information relevant to a conflict of interest investigation or decision; (4) to the National Archives and Records Administration or the General Services Administration in record management inspections; (5) to the Office of Management and Budget during legislative coordination on private relief legislation; and (6) in a judicial or administrative proceeding, if the information is relevant to the subject matter. This confidential report

will not be disclosed to any requesting person unless authorized by law.

Penalties

Falsification of information or failure to file or report information required to be reported may subject you to disciplinary action by your employing agency or other authority. Knowing and willful falsification of information required to be reported may also subject you to criminal prosecution.

Public Burden Information

This collection of information is estimated to take an average of one and a half hours per response, including time for reviewing the instructions, gathering the data needed, and completing the form. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Associate Director for Administration, U.S. Office of Government Ethics, Suite 500, 1201 New York Avenue NW., Washington, DC 20005-3917; and to the Office of Management and Budget, Paperwork Reduction Project (3209-0006), Washington, DC 20503. Do not send your completed OGE Form 450 to this address. See Section E for where to file.

Pursuant to the Paperwork Reduction Act, as amended, an agency may not conduct or sponsor, and no person is required to respond to, a collection of information unless it displays a currently valid OMB control number (that number is displayed in the upper right-hand corner of the first page of this OGE Form 450).

Mere disclosure of the required information does not authorize holdings, income, liabilities, affiliations, positions, gifts or reimbursements which are otherwise prohibited by law, Executive order, or regulation.

If you need assistance in completing this form, contact the ethics officials of the agency in which you serve or will serve.

Form Approved: OMB No. 3209-0006

Executive Branch CONFIDENTIAL FINANCIAL DISCLOSURE REPORT

Employee's Name	Last, first, middle initial)		Position/T	Title			Grade	Reporting Sta	atus:	
								New entr	ant	Annual
Agency			Branch/Unit an	nd Address			Work Phone	If New Entran	t, Date of A	Appointment
G1 1 1 10 11	- Tro									
Check box if special employee (SGE)	Government	an SGE, Hon	ne Address (Number, Stree	et, City, State an	d ZIP Code)					
I certify that the s	tatements I have made	on this form	and all attached statem	nents are Sig	nature of Employee				Date	e
true, complete, an	nd correct to the best o	f my knowled	lge.							
Date Received by Agency		iance with app	in this report, I conclude licable laws and regulation. elow).		and Title of Supervisor/Ot	her Intermediate	Reviewer (If agency requires)		Date	3
Signature of Agency	's Final Reviewing Officia	al and Title	Da	ate	Comments of Reviewing	Officials				
								(Ch	eck box if	f continued
								on	reverse)	
Part I: Assets a	and Income		ncome Sources (Identify sp		business, stock, bond,	(X) if no longer held	Nature of Income over \$200 (dividends, capital gains, salar		1	e (Only noraria)
	None	mutual fund, type/location of real estate, etc.)				longer neu		у, екс.)	Joi noi	-toruru)
	None		Rental Condo, Anchorage, Alaska Dee, Jones & Smith, Hometown, USA		+	$\frac{1}{1}$ $\frac{1}$		 		
Identify for you.	n: 1) assets with a fair ter than \$1,000 at the ng period or producing	Examples —				X	Salary Salary		- -	
dependent children		(S) Alexandria Medical Clinic, Alexandria, VA Franklin Equity Mutual Fund			<u> </u>	+	Dividends/Capita		+	
close of the reporting		1	Frankini Equity Mutuari	ruliu			Dividends/Capita	ii Gailis		
income over \$200	, and 2) sources of ch as salaries, fees,	1								
honoraria (other th	an U.S. Government	2							+	
	ent benefits, such as the an) which generated over a during the reporting income sources of your reported if greater than	_								
\$200 in income		3							+	
\$1,000 (greater than \$200 for honoraria).		4							+	
dependent children.	eeds to be reported for									
•	are not limited to):	5								
stocks, bonds, tax	shelters, real estate,									
	ions, annuities, IRAs, futures, trades and	6								
businesses, and parti										
	onal residence, unless d deposit accounts in	7								
	s. See instructions for	8								
		9							+	
Use copies of	f blank pages	10								

OGE	Form	450, 5	5 CFR	Part :	2634,	Subpart	I
U.S.	Office	of Go	overnn	nent E	thics	(2/96)	

Employee's Name (Last first widdle initial)	Work Phone
Employee's Name (Last, first, middle initial)	WOIK PHONE

Part II: Liabilities

None

Report for you, your spouse, and dependent children liabilities over \$10,000 owed at any time during the reporting period (over \$10,000 at the end of the period if revolving charge accounts). Exclude a mortgage on your personal residence unless it is rented out; loans for autos, household furniture or appliances; and liabilities owed to certain family members (see instructions).

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Part		Abiotid	Positions
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None

Report any positions, whether or not compensated, which you held outside the U.S. Government during the reporting period. Positions include (but are not limited to) an employee officer, director, trustee, general partner, proprietor, representative, executor, or consultant for a business, non-profit or labor organization or educational institution. Exclude positions with religious, social, fraternal, or political entities or those solely of an honorary nature. You need not report any positions of your spouse or dependent children.

Part IV: Agreements and Arrangements

None

Report your agreements or arrangements for current or future employment, leaves of absence, continuation of payment by a former employer (including severance payments), or continuing participation in an employee benefit plan.

You need not report agreements or arrangements of your spouse or dependent children.

Part V: Gifts and Travel Reimbursements

Do not complete this part if you are a new entrant or special Government employee.

None

Report for you, your spouse, and dependent children gifts or travel reimbursements you have received from one source totaling \$250 or more. Exclude anything valued at \$100 or less; anything received by your spouse or dependent child totally independent of their relationship to you; anything from a relative or from the U.S. Government; anything given to your agency in connection with your official travel; and food, lodging, or entertainment received as personal hospitality at the donor's residence or premises.

Creditors (Name and address)	Type of Liability (Mortgage, promissory note, etc.)
Example First Alaska Bank, Anchorage, Alaska	Mortgage on rental property in Anchorage, AK
1	
2	
3	

Organization (Name and address)		Type of Organization	Position	(X) if no longer held
Example	Dee, Jones & Smith, Hometown, USA	Law Firm	Associate	X
1				
2				
3				
4				

Terms of	Any Agreement or Arrangement	Parties	Date
Example	Will receive retained pension benefits (independently managed, fully funded, defined contribution plan)	Dee, Jones & Smith, Hometown, USA	12/95
1			
2			
3			

Source		Description (For travel-related items, include itinerary)	Date
Example	Dee, Jones & Smith, Hometown, USA	Leather briefcase as a departing gift	12/95
1			
2			
3			
4			